

# CITY OF OVIEDO

as Contracted with PDCS, LLC

Building Services ■ 400 Alexandria Blvd ■ Oviedo, FL 32765 ■ 407-971-5755

## PLUMBING PERMIT APPLICATION

### “ORPHAN”

DATE: \_\_\_\_\_

OWNER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

LOT NO. \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

Class of Building:  Existing  New Construction

Type of Building:  Residential  Commercial  Other | Valuation of work: \$ \_\_\_\_\_

Description of Work: \_\_\_\_\_

	# of Units	Unit Cost	Total		# of Units	Unit Cost	Total
Bath Tubs		x \$3.00 =		Sinks		x \$3.00 =	
Drinking Fountain		x \$3.00 =		Solar Piping		x \$3.00 =	
Disposal		x \$3.00 =		Soda Fountains		x \$3.00 =	
Dishwasher		x \$3.00 =		Urinals		x \$3.00 =	
Floor Drains		x \$3.00 =		Vacuum Breakers		x \$3.00 =	
Sewer Connection		x \$3.00 =		Washing Machines		x \$3.00 =	
Ice Maker		x \$3.00 =		Water Closets		x \$3.00 =	
Laundry Tubs		x \$3.00 =		Water Heaters		x \$3.00 =	
Lavatories		x \$3.00 =		Water Piping		x \$3.00 =	
Pool Piping		x \$3.00 =		Water Softener		x \$3.00 =	
Showers		x \$3.00 =					

Total Unit Cost \$ \_\_\_\_\_ + Base Permit Fee \$ 25.00 = Permit Fee \$ \_\_\_\_\_

State Fee (3% of Permit Fee, minimum \$4.00) \_\_\_\_\_ x \$0.03 = \$ \_\_\_\_\_

Total Permit Fee \$ \_\_\_\_\_

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

License Holder: \_\_\_\_\_

License No. \_\_\_\_\_ Phone No. \_\_\_\_\_

Email: \_\_\_\_\_ Fax No. \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

**OWNER'S AFFIDAVIT:** I swear or affirm that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

CONTINUED ON THE BACK →

Signature of Owner / Agent \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Owner / Agent \_\_\_\_\_

STATE OF FLORIDA COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is  Personally Known to me or has  Produced (type of identification) \_\_\_\_\_ as identification and who did take an oath.

(SEAL)

Signature of Notary Public \_\_\_\_\_  
State of Florida

Print/Type/Stamp Name \_\_\_\_\_  
of Notary Public

Signature of Contractor \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Contractor \_\_\_\_\_

STATE OF FLORIDA COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is  Personally Known to me or has  Produced (type of identification) \_\_\_\_\_ as identification and who did take an oath.

(SEAL)

Signature of Notary Public \_\_\_\_\_  
State of Florida

Print/Type/Stamp Name \_\_\_\_\_  
of Notary Public

FBC 105.3 Shall be inscribed with the date of application and the code in effect as of that date (Code 2007 FBC) 713.135 (5)(6) Florida Statutes

**BELOW – FOR OFFICE USE ONLY**

VALUATION OF COMPLETED WORK	PLAN REVIEW FEE	PERMIT FEE	OTHER
STATE FEE			
SPECIAL CONDITIONS BLDG:		SPECIAL CONDITIONS OTHER:	

APPLICATION ACCEPTED BY / DATE	PLANS CHECKED BY	APPROVED FOR ISSUE BY / DATE

SPECIAL APPROVALS	APPROVED BY	DENIED BY	DATE
BUILDING			

**\*\* As of October 1, 2010, Florida Statutes 553.721 and 468.631 require that a State Fee be charged for every permit issued. This fee will be added to the permit fee. This State Fee is calculated as noted below:  
The Total of the Permit Fee + Plan Review Fee multiplied by 3% (or 0.03) = State Fee  
The Minimum State Fee is \$4.00**

Please contact the Building Department at 407-971-5755 with any questions.